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| PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875                                                                                                                                                                                                                                                                                                                               |                                                                 |                                           |                                       |                                                                                                |                  |   | Application or Docket Number<br>10/595,215 |                                         |    | ing Date<br>24/2006   | ☐ To be Mailed         |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|-------------------------------------------|---------------------------------------|------------------------------------------------------------------------------------------------|------------------|---|--------------------------------------------|-----------------------------------------|----|-----------------------|------------------------|--|
| APPLICATION AS FILED – PART I (Column 1) (Column 2)                                                                                                                                                                                                                                                                                                                                                   |                                                                 |                                           |                                       |                                                                                                |                  |   |                                            | OTHER THAN SMALL ENTITY OR SMALL ENTITY |    |                       |                        |  |
|                                                                                                                                                                                                                                                                                                                                                                                                       | FOR                                                             | ,                                         | NUMBER FILED                          |                                                                                                | NUMBER EXTRA     |   | RATE (\$)                                  | FEE (\$)                                | П  | RATE (\$)             | FEE (\$)               |  |
|                                                                                                                                                                                                                                                                                                                                                                                                       | BASIC FEE<br>(37 CFR 1.16(a), (b),                              | or (c))                                   | N/A                                   |                                                                                                | N/A              |   | N/A                                        |                                         | ]  | N/A                   |                        |  |
|                                                                                                                                                                                                                                                                                                                                                                                                       | SEARCH FEE<br>(37 CFR 1 16(k), (i),                             | or (m))                                   | N/A                                   |                                                                                                | N/A              |   | N/A                                        |                                         |    | N/A                   |                        |  |
|                                                                                                                                                                                                                                                                                                                                                                                                       | EXAMINATION FE<br>(37 CFR 1,16(o), (p),                         | E<br>or (q))                              | N/A                                   |                                                                                                | N/A              |   | N/A                                        |                                         |    | N/A                   |                        |  |
|                                                                                                                                                                                                                                                                                                                                                                                                       | TAL CLAIMS<br>CFR 1.16(i))                                      |                                           | minus 20 =                            |                                                                                                | •                |   | x s =                                      |                                         | OR | x s =                 |                        |  |
|                                                                                                                                                                                                                                                                                                                                                                                                       | EPENDENT CLAIM<br>CFR 1.16(h))                                  | IS                                        | minus 3 =                             |                                                                                                |                  | ] | X \$ =                                     |                                         | 1  | X \$ =                |                        |  |
|                                                                                                                                                                                                                                                                                                                                                                                                       | APPLICATION SIZE<br>(37 CFR 1.16(s))                            | FEE she is \$: add                        | ets of pap<br>250 (\$125<br>tional 50 | wings exceed 100<br>ation size fee due<br>ty) for each<br>tion thereof. See<br>37 CFR 1.16(s). |                  |   |                                            |                                         |    |                       |                        |  |
| MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))                                                                                                                                                                                                                                                                                                                                                     |                                                                 |                                           |                                       |                                                                                                |                  |   |                                            |                                         | 1  |                       |                        |  |
| * If the difference in column 1 is less than zero, enter "0" in column 2.                                                                                                                                                                                                                                                                                                                             |                                                                 |                                           |                                       |                                                                                                |                  |   | TOTAL                                      |                                         | ]  | TOTAL                 |                        |  |
| APPLICATION AS AMENDED - PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY                                                                                                                                                                                                                                                                                             |                                                                 |                                           |                                       |                                                                                                |                  |   |                                            |                                         |    |                       |                        |  |
| AMENDMENT                                                                                                                                                                                                                                                                                                                                                                                             | 02/01/2012                                                      | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                       | HIGHEST<br>NUMBER<br>PREVIOUSL<br>PAID FOR                                                     | PRESENT<br>EXTRA |   | RATE (\$)                                  | ADDITIONAL<br>FEE (\$)                  |    | RATE (\$)             | ADDITIONAL<br>FEE (\$) |  |
|                                                                                                                                                                                                                                                                                                                                                                                                       | Total (37 CFR<br>1.16(i))                                       | * 13                                      | Minus                                 | 20                                                                                             | = 0              | ı | x s =                                      |                                         | OR | X \$60=               | 0                      |  |
|                                                                                                                                                                                                                                                                                                                                                                                                       | Independent<br>(37 CFR 1.16(h))                                 | • 2                                       | Minus                                 | <del></del> 3                                                                                  | <b>-</b> 0       | ] | X \$ =                                     |                                         | OR | X \$250=              | 0                      |  |
|                                                                                                                                                                                                                                                                                                                                                                                                       | Application Size Fee (37 CFR 1.16(s))                           |                                           |                                       |                                                                                                |                  |   |                                            |                                         |    |                       |                        |  |
| Ĺ                                                                                                                                                                                                                                                                                                                                                                                                     | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) |                                           |                                       |                                                                                                |                  |   |                                            |                                         | OR |                       |                        |  |
|                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                 |                                           |                                       |                                                                                                |                  |   | TOTAL<br>ADD'L<br>FEE                      |                                         | OR | TOTAL<br>ADD'L<br>FEE | 0                      |  |
| (Column 1) (Column 2) (Column 3)                                                                                                                                                                                                                                                                                                                                                                      |                                                                 |                                           |                                       |                                                                                                |                  |   |                                            |                                         |    |                       |                        |  |
| L                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                 | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                       | HIGHEST<br>NUMBER<br>PREVIOUSL<br>PAID FOR                                                     | PRESENT<br>EXTRA |   | RATE (\$)                                  | ADDITIONAL<br>FEE (\$)                  |    | RATE (\$)             | ADDITIONAL<br>FEE (\$) |  |
| ä                                                                                                                                                                                                                                                                                                                                                                                                     | Total (37 CFR<br>1,16())                                        |                                           | Minus                                 |                                                                                                | -                | ] | x s =                                      |                                         | OR | x s =                 |                        |  |
| M                                                                                                                                                                                                                                                                                                                                                                                                     | Independent<br>(37 CFR 1 16(h))                                 |                                           | Minus                                 | ***                                                                                            | -                | ] | x s =                                      |                                         | OR | x s =                 |                        |  |
| AMENDMENT                                                                                                                                                                                                                                                                                                                                                                                             | Application Size Fee (37 CFR 1.16(s))                           |                                           |                                       |                                                                                                |                  | 1 |                                            |                                         | 1  |                       |                        |  |
| AM                                                                                                                                                                                                                                                                                                                                                                                                    | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) |                                           |                                       |                                                                                                |                  |   |                                            |                                         | OR |                       |                        |  |
|                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                 |                                           |                                       |                                                                                                |                  |   | TOTAL<br>ADD'L<br>FEE                      |                                         | OR | TOTAL<br>ADD'L<br>FEE |                        |  |
| * If the entry in column 1 is less than the entry in column 2, write "O' in column 3.  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 2, enter "20".  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |                                                                 |                                           |                                       |                                                                                                |                  |   |                                            |                                         |    |                       |                        |  |

This collection of Information is required by 37 CFR 1.16. The Information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 38 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to comprise, including patienting, preparing, and submitting the completed application from the USPTO. Time will way depending up the individual case. Any comments on the amount of time you require to complete his tool man and or supposition for reducing this faults, should be sent to the Chief Information Officer, U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandrius, W.A. 2818-1450, D.O. NOT SEND FEES OR GOMPLETED FORMS OT HIS